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**UNITED STATES DISTRICT COURT
NORTHERN DISTRICT OF CALIFORNIA
SAN FRANCISCO, CALIFORNIA**

I, Emilio Morales, certify that on June 12, 2007, I caused a copy of the following documents:

- 18 a. Summons in a civil case
19 b. Complaint for Mandamus

20 to be served on the following defendants listed below by USPS Certified Mail with Return
21 Receipt Requested:

22 A. Certified Mail # EB 129751882US
23 US Attorney's Office
24 450 Golden Gate Ave., 11th Floor
San Francisco, CA 94102

25 B. Certified Mail # EB129751803US
26 Michael Chertoff
27 Secretary of the Department of Homeland Security
US Department of Homeland Security
Washington, D.C., 20528

1 C. Certified Mail # EB129751896US
2 Robert S. Mueller, III,
3 Director of the Federal Bureau of Investigation
4 Federal Bureau of Investigation
5 J. Edgar Hoover Building
6 935 Pennsylvania Avenue, NW
7 Washington, DC 20535-0001

5 D. Certified Mail # EB129751817US
6 Emilio T. Gonzales,
7 Director of U.S. Citizen and Immigration Services

8 Please refer to the attached copies of the USPS mail tracking results with Certified Mail
9 Receipts.

10 I declare under penalty of perjury that the foregoing information is true and correct.
11

12

13

14 Date: August 7, 2007



15 Emilio Morales
16 3803 Darwin Dr., Apt # 204
17 Fremont, CA 94555
18 Tel: 510-797-4951
19 Email: emiliomrls@yahoo.com

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(ASE No: C 07-02991 MJJ

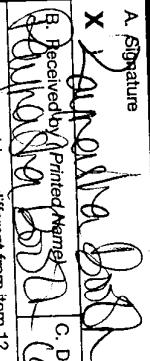
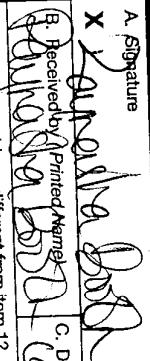
SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

SCOTT N. SCHROEDER
450 GOLDEN GATE AV.
BOX 336055
SAN FRANCISCO, CA 94102

COMPLETE THIS SECTION ON DELIVERY

A. Signature	<input checked="" type="checkbox"/>	Agent
		<input type="checkbox"/> Addressee
B. Received by	Printed Name	C. Date of Delivery
		08/08/07
D. Is delivery address different from item 1?		
<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
If YES, enter delivery address below:		

3. Service Type	
<input checked="" type="checkbox"/> Certified Mail	<input type="checkbox"/> Express Mail
<input type="checkbox"/> Registered	<input type="checkbox"/> Return Receipt for Merchandise
<input type="checkbox"/> Insured Mail	<input type="checkbox"/> C.O.D.

4. Restricted Delivery? (Extra Fee) Yes2. Article Number
(transfer from service label) EB 12975188205

Form 3811, February 2004 Domestic Return Receipt

102595-02-M-1540



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Your item was delivered at 3:21 AM on June 15, 2007 in WASHINGTON, DC 20535 to FBI 20535 PU . The item was signed for by M SIMON.

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Your item was delivered at 11:12 AM on June 13, 2007 in SAN FRANCISCO, CA 94102. The item was signed for by R BOOTH.

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